Disclosure Re	Amendment Yes No							
Use this form for ge	eneral report and committee	information, must be	e signed and sul	bmitted along with	other detailed forms.			
Do not use this form	n to update information	No market and the second						
1. Committee Info	rmation							
a. Full Name Kathy Mesel Heint	ol for DOE				c. ID Number			
		*			KJM234			
b. Mailing Address (inc 904 Patricians Lane	lude City, State and Zip Code)				d. Date Filed			
Monroe, NC 28110	•							
141011100, 140 20110	,				e. Phone Number			
					704-256-4807			
2. Report Year	3. Period Start Date (mm/c	dd/yy) 4. Period (mm/dd/yy)		5. Treasurer Fu	II Name			
2018	04/22/18	06	/30/18	Sarah W. May				
6. Type of Commit		9. Type of Report	t (check or	ly one type of repo	rt from one category)			
Candidate Camp	· = ·	Municipal	State/C		Referendum			
PAC Independent	Referendum	Organizationa		Organizational	Organizational			
Expenditure Legal Expense F	Joint Fundraiser	Thirty-five da	у	Quarterly	Pre-referendum			
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final			
Booster Fund"		Pre-election		Second	Supplemental Final			
Building Fund		Pre-runoff		Third	Annual			
		Semi-annual		Fourth	Special			
Other:		Mid Yea Year End	l —	Semi-annual Mid Year	10 Special Depart Name			
		Final	· 1H	Year End	10. Special Report Name			
8. Number of Fund	raisers this Report	Special	18	Final				
	•			Special				
11. Account Inform	ation		11. Account	Information				
a. Financial Institution	Full Name		a. Financial Inst	itution Full Name				
Bank of America					-			
b. Purpose	c. Account Code		b. Purpose		c. Account Code			
	KH	1	HEC		1			
	d. Period Begin Balance		JUI	_ 1 0 2018	d. Period Begin Balance			
\$ 105.27			Union Co	. Board of Elections	\$			
CERTIFICATION		7)	gingh gg					
the NC General Stati	ates and that no funds are co	mmingled with proh	ibited or other	non-disclosed fund	3, & 22D-22M of Chapter 163 of s. I further certify that this report			
is complete, true and	correct and that I have been	trained by the NC S	State Board of E	Elections.	1 0 10			
-	Printed Name of Signer	si si	ignature of Appoint	ted Treasurer	Date			
FOR OFFICE USE O	NLY / /		- 0	0-				
Date Received:	8/0/10	Employee:	gke	40	Delivery Method Normal Mail			
Date Postmarke	Registered Mail Hand Delivered							
Date Scanned: Employee: Electronically Filed Signer has not receive								
Date Data Entered: Employee: mandatory training								
Please Note: Thi					ress, treasurer, assistant treasurer,			
	You must amend the Stater	n of books informat nent of Organization	.5		ttee changes			

Amendment

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable)	2. Type of Report		3. ID Number		
Kathy Mesel Heintel for BOE	Second Quarter 20		KJM234		
Start of Election Cycle: January 1,	2018	Total this Reporting Péric	Total this Election Cycle		
4) Cash on Hand at Start		\$ 105.27	\$ 161.27		
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$		
6) Contributions from Individuals	(CRO-1210)	\$	\$ 27.00		
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$		
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$		
9) Loan Proceeds	(CRO-1410)	\$	\$		
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$		
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$		
11b) Contributions from Not-for-Profit Organization	ons <i>(CRO-1250)</i>	\$	\$		
11c) Outside Sources of Income	(CRO-1250)	\$	\$		
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$		
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$		
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c)	c, 11d and 11e)	\$	\$ 27.00		
EXPENDITURES					
13) Disbursements	er og en				
13a) Operating Expenditures	(CRO-1310)	\$ 28.00	\$ 84.00		
13b) Contributions to Candidates/Political Commit	tees (CRO-1310)	\$	\$		
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$		
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$		
15) Loan Repayments	(CRO-1420)	\$	\$		
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$		
17) In-Kind Contributions	(CRO-1510)	\$	\$ 27.00		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13	5, 16 and 17)	\$ 28.00	\$ 111,00		
19) Cash on Hand at End (Add lines 4 and 12 together, then subt		\$ 77.27	\$ 77.27		
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campaign	ns) <i>(CRO-1430)</i>	\$			
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$			
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$			
24) Account Transfers Within the Committee	(CRO-1720)	\$			
25) Administrative Support RECEIVED) (CRO-1710)	\$	\$		
26) Forgiven Loans JUL 1 0 2018	(CRO-1440)	\$	\$		
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$		
28) Contributions to be Refunded	ns	\$	\$		

Amendment

Yes

No No

Cont	ributions fro	om Individuals	S		Pg 1		Amendment	-	
Use thi	s form to report in	dividual contribution	s over \$	50 or contributions	under \$50 if form	of <u>1</u> CRO 1205 is	Yes Yes	⊠ N	
1. 0011	mittee run ianile	tand rund it applie	cable)				lumber		
1.15	Mesel Heintel for E		Who you was				KJM234		
	ributor Informat			Add 🗌	Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Job Title/Profe	ssion	d. Comm	ents		
				c. Employer's Nat	ne/Specific Field				
						e. Electio	e. Election Sum to Date		
						\$			
f. Prior	g. Account Code	h. Form of Payment	i. In	-Kind Description	j. Date (mm/dd	 /yyyy)	k. Amount		
							\$		
	; ;						\$		
				W					
3. Contr	ibutor Informatio	on.		Add	Remove		\$		
	me, Mailing Address &	& Phone		b. Job Title/Profess		d. Comme	ents	541 S.L. Sto. 15	
(include	city, state, & zip)			_		:			
				c. Employer's Nam	e/Specific Field				
							Sum to Date		
f. Prior	g. Account Code	h. Form of Payment	i In-l	Kind Description	i Dec (Car	\$			
		- A S S S S S S S S S S S S S S S S S S	1, 111-)	ward Description	j. Date (mm/dd/	уууу)	k. Amount		
							\$		
			-				\$		
Contri	hadaa I-faaa I						\$		
	butor Informatione, Mailing Address &	the state of the s		Add	Remove				
	city, state, & zip)		···········	U. UUD TIRAT (OIESSI	011	d. Commen	its		
	RECEI	/ED		c. Employer's Name	/Engaiga Field	_			
				c. Employer s (vame	opecine Field	-			
JUL 1 0 2018			1		e. Election :	Sum to Date			
	Union Co. Board or					\$			
Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/y;	ууу)	k. Amount		
			<u> </u>				\$		
			į			-	\$		
			<u> </u>			1,	\$		
	only this Page					\$		0.00	
	of ALL CRO-								
(This line	must be on line 6 of D	etailed Summary Page Cl	(O-1100)			\$		27.00	

Use this form	to report expenditure	es from the comm	ittee	Pg for; operating expens	3 1 of	1	☐ Yes ⊠
committees ar	nd coordinated party	expenditures.		ror, operating expens	es, contributions (o candid	ate/political
1. Committee	Full Name (and Fu	nd if applicable)	3.5			e com constant	10.007.00
Katny Mesel	Heintel for BOE			<u>anna ann an Anna airt a Cathairtean a bhr</u>		WENT NEW	2. ID Number
3. Type of Dis		ease use separate	CR	O-1310 forms for each	le tima of DI-1		KJM234
		Contributions to C	andi	dates/Political Committees			
4. Payee Info				Add	Domais	Coordinate	d Party Expenditures
a. Full Name, Mr	niling Address & Phone			o. Coordinated Committee	Remove		
(include city, stat	e, & zip)		F	or coordinated Committee	ivaine		mments
Bank of Amei	ica		-			\$14	per month
5935 Wedding	gton Road		<u> </u>	. Level Registered (Specify		***********	he months
Wesley Chapel, NC 28104			Ī			May and	
				Federal State	•		2018
			-		Municipality:	e. Elec	ction Sum to Date
						\$ 8	4.00
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount		
KH1		К		05/01/18		R. Reg	uired Remarks
				03/01/18	\$14.00	ļ	
KHI		K		06/01/2018	\$14.00		
4. Payee Inform	mation		λ	dd - Fi			
	ling Address & Phone			.uu Coordinated Committee I	Remove		
(include city, state			0.	Coordinated Committee (Name	d. Con	iments
	, 3, 3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		-				
			_	Lovel Desistant (C., 10.)		_	
			-	Level Registered (Specify) Federal		_	
			-	₹ <u></u>	County:		
			<u> </u>	State	Municipality:	e. Elect	tion Sum to Date
						\$	
f. Account Code	g. Form of Payment	h. Purpose Code	<u> </u>	i. Date (mm/dd/yyyy)	j. Amount	k Regu	iired Remarks
						n. nequ	area Remarks
			_		\$		
	}				\$		
4. Payee Inforn	l nation		 (1/1	<u> </u>	1	
	ing Address & Phone	property of the second of the second			Remove		
(include city, state,			<i>D.</i> 1	Coordinated Committee N	ame	d. Com	nents
	ECEIVEL	1					
1.1		,	c. I	evel Registered (Specify)		_	
	JUL 1 0 2018	ļ		Federal	County:	-	
	JOL 10 LUIU		ī	State	Municipality:	a Flooti	S / . T
Union Co. Board of Elections				winterpanty.	c. Election Sum to Date		
OUIOU CO. BOSIA OI EISCHOUS						\$	
Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Requi	red Remarks
ļ				-	\$		
			_	-,	Ψ		
	1				\$		
. Total only thi						\$	28.00
. Total of ALL	CRO-1310 Pages					Ψ	40.00
(This line goes in I	ine 13a of Detailed Sumn	ary Page CRO-1100	if Op	verating Expenses)			
(This line goes in l	ine 13b of Detailed Summ	iary Page CRO-1100	if Co	outrils to Candidates/Politics	al Comm)	\$	84.00
(1 ms une goes in i	ine 13c of Detailed Summ	ary Page CRO-1100	if Co	ordinated Party Expenditus	res)		
. rurpose Code .* - Media	s (List detailed expe B* - Printing	matture code in (I	1.) a	bove)			
- Salaries	F* - Equipment	C* - Fundr G - Politica	aisi:	ng	D - To Anothe		
- Postage	J - Penalties	K* - Office		·			fice Expenses
* - Other					Ų* - Donation	to Legal	Expense Fund
Codes require	detailed explanation	n in required rer	nar	ks field (k)			

Disbursements

Amendment

Use this form to report non-monetary contributions, donations, guse CRO-1215 if In-Kind Contributions were or will be refunded.	goods c	or serv	Pg <u>1</u> vices provided to	of the co	<u>I</u> Yes ⊠ No mmittee or fund.
1. Committee Full Name (and Fund if applicable)	2d Witm	<u>n 7 az</u>	ays.		ID Number
Kathy Mesel Heintel for BOE		28 t. av. 1. 1. 1.	Mend Deviation of the Control	At Anna	ID Number KJM234
3. Contributor Information Add	Remov	VA .			
a. Full Name, Mailing Address & Phone	,	~	Contributor	c. (Comments
(include city, state, & zip)		Indi	dividual		Untileuts
ı			ındidate		
		Part PAC	•		
		Refe	ferendum	d, E	Clection Sum to Date
		Othe	her Receipt Source	\$	
e. Description			f. Date (mm/dd/y	L	g. Fair Market Amount
		,			\$
					\$
					\$
3. Contributor Information Add	Remove	/A			
a. Full Name, Mailing Address & Phone	·		Contributor	c. Cr	omments
(include city, state, & zip)	口	Indiv	ividual		
		Cand Party	ididate tv		
		Party PAC	•		
		Refer	erendum	d. Ele	ection Sum to Date
-		Other	er Receipt Source	\$	
e. Description			f. Date (mm/dd/yy	ууу)	g. Fair Market Amount
					\$
					\$
	-			ļ	\$
a. Full Name, Mailing Address & Phone	Remove b. Type		ontributor	Cor	mments
(include city, state, & zip)		Individ		C. Con	iments
RECEIVED	! ==	Candio	lidate		
JUL 1 0 2018		Party PAC			
Union Co. Board of Elections			rendum r Receipt Source		ction Sum to Date
Dillon GO, BOARD OF ERECTIONS Description			f. Date (mm/dd/yyy	\$	
		-	I. Date (minimal)	<u>y)</u>	g. Fair Market Amount \$
					\$
		+			
. Total only this Page	eg talak es	1			\$
. Total of ALL CRO-1510 Pages					0.00
(This line must be on line 17 of Detailed Summary Page CRO-1100)				\$	27.00

In-Kind Contributions

Amendment

No